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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/720,872
	Filing Date	11/24/03
	First Named Inventor	Thomas M. Crawford
	Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	SEAG 63445

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): - Letter - Supplemental Application Data Sheet - return postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Robert P. Lenart Pietragallo, Bosick & Gordon
Signature	<i>Robert P. Lenart</i>
Date	12/08/03

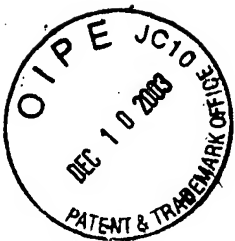
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Robert P. Lenart		
Signature	<i>Robert P. Lenart</i>	Date	12/08/03

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: : PHOTOCONDUCTIVE OPTICAL
: WRITE DRIVER FOR MAGNETIC
THOMAS M. CRAWFORD ET AL. : RECORDING
:
Serial No.: 10/720,872 : Attorney Docket No. SEAG 63445
:
Filed: November 24, 2003 :

**LETTER FOR SUBMISSION OF
SUPPLEMENTAL APPLICATION DATA SHEET**

December 8, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

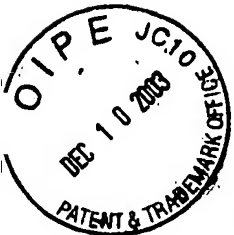
Sir:

Pursuant to the provisions of 37 CFR Section 1.76(c)(1), Applicants submit herewith a Supplemental Application Data Sheet. The Supplemental Application Data Sheet is being submitted to add the Assignee Information.

Respectfully submitted,

Robert P Lenart

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Supplemental Information Data Sheet

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Application Information

Title Line One::	Photoconductive Optical Write Driver For
Title Line Two::	Magnetic Recording
Total Drawing Sheets::	7
Application Type::	Utility

Representative Information

Representative Customer Number:: 35810